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List of issues in relation to the fifth periodic report of Romania

Addendum

Replies of Romania to the list of issues*

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Part I

1. Answer to question 1

1. With a view to strengthening the capacity of the National Authority for the Protection of Children's Rights and Adoption (NAPCRA) to implement child-related legislation, policies and programmes, Government Decision No 299/2014 on the organisation and operation of the National Authority for the Protection of Children's Rights and Adoption sets out the rules for the establishment and organisation of the Coordinating Council for the Protection and Promotion of Children's Rights and Adoption. The Council acts as an advisory body to the President of NAPCRA and ensures the cooperation of its member institutions and organisations for the purpose of implementing the national public policy and the Government Plan on the protection and promotion of children's rights and adoption, as well as for improving interinstitutional relations between the public authorities involved in the protection and promotion of child rights and adoption.

2. The Council consists of one top representative from each of the following institutions and bodies:

- National Authority for the Protection of Children's Rights and Adoption;
- Ministry of Regional Development and Public Administration;
- Ministry of Interior;
- Ministry of National Education;
- Ministry of Health;
- Ministry of Justice;
- Ministry of Foreign Affairs;
- Ombudsman;
- National Union of Romanian County Councils;
- Association of Directors of General Directorates for Social Assistance and Child Protection;
- Romanian Federation of Non-Governmental Organisations for Child Rights Protection;
- Romanian Association of Social Workers;
- Romanian Association of Psychologists.

3. In accordance with its Rules of Procedure, besides standing members representing the aforementioned institutions and organisations, the Coordinating Council has endorsed NAPCRA President's proposal of having representatives of UNICEF Romania, Save the Children, SERA Romania, HHC Romania and the National Student Council present at the meetings. The representatives of these organisations hold the status of permanent guests.

2. Answer to question 2

4. In order to prohibit and eradicate de facto discrimination, in 2016 the Ministry of National Education drafted and approved two legal acts aimed at preventing, combating and prohibiting school segregation in pre-university educational establishments across Romania.

5. One of these orders approves the action plan for school desegregation and higher quality education in pre-university educational establishments, being a framework order on the prohibition of school segregation.

6. The action plan for desegregation and higher quality education in pre-university educational establishments across Romania is the public policy document which sets out

the objectives, strategic measures and schedule of activities meant to prevent and address any form of school segregation in the Romanian education system.

7. In order to implement the action plan for desegregation and higher quality education in pre-university educational establishments across Romania, given the complexity of the activities and the need for cross-cutting and integrated approaches, the Ministry of National Education may conclude cooperation agreements with the Ministry of Regional Development, Public Administration and European Funds, the Ministry of Health, and the Ministry of Labour and Social Justice, as well as with non-governmental organisations or other educational partners.

8. Action plan implementation will be coordinated by the National Commission for Desegregation and Educational Inclusion, a body under the Ministry of National Education, made up of experts from the ministry, academia, non-governmental organisations, and other relevant institutions.

9. The other Order, concerning the prohibition of school segregation in pre-university educational establishments, redefines school segregation by setting out additional causes that can generate it.

10. Hence, besides the already existing ethnic criterion, it also includes criteria like disabilities or special educational needs, parents'/families' socioeconomic status, area of residence, and the academic results of primary beneficiaries of education.

11. Thus, the physical separation of school children from families with a similar socioeconomic status into groups/classes/buildings/last two row desks/other facilities in mainstream education, resulting in their disproportionate share compared to the majority, is prohibited.

12. As regards the measures taken to prohibit and eradicate discrimination against asylum-seeking children, Law No 331/2015 amending and supplementing certain legal acts regarding foreigners changed Romania's asylum legislation.

13. Hence, it is provided that they are to be assigned a national identification number, which is recorded in the temporary identity document and gives them access to social rights for asylum-seeking children have similar rights to those of underage Romanian citizens.

3. Answer to question 3

14. From a legislative perspective, one of the practical measures recently taken to ensure birth registration was the drafting and approval of Government Emergency Order No 33/2016 amending and supplementing certain legal acts concerning vital records and identity documents of Romanian citizens and Government Decision No 801/2016 laying down procedures for the collection and deletion of data related to people with a declared identity and amending and supplementing certain legal acts concerning the consistent application of civil and population registration provisions.

15. Amendments were made to address the situation of children whose identity could not be proven and who were, therefore, denied fundamental rights as relevant legislation provided that certain procedures had to be implemented and documents presented in order to register the birth, which could delay birth certificate issuance and, consequently, access to various services.

16. Therefore, two timeframe options were set for birth registration:

- As a general rule, the vital event is to be registered within 30 days of the child's birth (compared to 15 days as previously stipulated), which gives parents and state authorities enough time to clarify, via certain administrative procedures, all aspects related to the registration of the life event. As regards the 30-day timeframe, new rules were laid down allowing for a child's birth to be registered even if, upon hospital admission, the mother cannot show an ID document as proof of identity;
- Exceptionally, birth may also be registered beyond the 30-day time limit provided that certain administrative procedures are met.

17. The new regulations replaced the legal proceeding prescribed for delayed registration of birth with an administrative procedure.

18. Also, whilst previous legislation provided that a forensic medical examination be conducted for the delayed registration of birth, this is currently required only in the absence of the certificate of live birth issued by the attending physician.

19. In addition, recent amendments stipulate that, when identifying a mother whose birth has not been registered, state authorities will have to take the required steps to register the birth and make sure the mother gets an identity document.

20. To this end, even if she has no vital records, the mother can register the newborn child by declaring her identity, which is to be recorded in a report; the procedure looks at the child's best interests and is based on the requirement for every child to have an identity.

21. In order to provide technical support to the Public Social Assistance Service (PSAS) in carrying out its birth registration duties, based on its coordination and methodological guidance responsibilities, NAPCRA drafted a legal act approving the methodology for the fulfilment of duties assigned to local public administration authorities, institutions and professionals involved in the prevention of and intervention in cases of children at risk of abandonment or abandoned at healthcare facilities, which was approved under Government Decision No 1103/2014.

22. With the approval and entry into force of the above-mentioned decision, administrative conditions and procedures were set for each institution's experts, along with the steps that representatives of healthcare facilities, public social assistance services, civil registration departments, police departments and general directorates for social assistance and child protection have to take to fulfil their responsibilities with respect to children at risk of abandonment or abandoned at healthcare facilities.

23. Also, the activities set out for each of the aforementioned authorities must be carried out within clear deadlines so as to avoid children's extended and unjustified stay in maternity wards or healthcare facilities.

24. As regards the support given to the PSAS to take steps and carry out its birth registration duties, it is worth mentioning that the clarifications made by the aforementioned government decision provide the conditions for implementing consistent working procedures at national level and dividing the responsibilities of various institutions and the manners in which they must support the PSAS to fulfil its duties.

25. For the purpose of providing financial support to public social assistance services under the Human Capital Operational Programme (HC OP) 2014-2020, Priority Axis 4 "Social Inclusion and Poverty Alleviation" includes a specific objective to increase the quality of the social assistance system, including the capacity of public social assistance services.

26. The main activities which may be funded under the specific objective "Increasing the quality of the social assistance system through new instruments/procedures/mechanisms, etc. and the enhancement of professionals' skills at system level" are:

- Developing the mechanism aimed at identifying the individual needs of vulnerable people with special needs (dependent lone persons) and intervention measures/procedures.
- Building capacities for data collection, analysis, prognosis, etc. in the field of social assistance/inclusion, including those aimed at deinstitutionalization management.
- Training, qualification and counselling activities for the staff of social assistance institutions and social service providers, including experience exchange activities (possibly in the context of transnational cooperation).

27. This objective is allocated approximately EUR 100 000 000.

4. Answer to question 4

28. Although the steps and measures taken by the authorities in the past years showed a clear reorientation of institutional efforts towards preventing children's separation from their parents, actions to identify children at risk of abuse, neglect, and exploitation remained deficient.

29. Therefore, two instruments have been developed for national implementation, aimed at first identifying children who need help and later giving them access to the services they need, under the direct coordination and methodological guidance of the general directorate for social assistance and child protection: the observation form and the risk assessment form.

30. The observation form has been designed in a way that makes it easy to fill in by the representatives of the public social assistance service as well as by other professionals who have contact with the child at local level.

31. Following completion or, as the case may be, reception of this document, the representatives of the public social assistance service assess children's situation based on the other instrument developed — the risk assessment form — which allows experts to identify cases requiring immediate intervention.

32. These two instruments are annexed to the Working Methodology for the Cooperation of General Directorates for Social Assistance and Child Protection and Public Social Assistance Services, along with templates for the documents they have to develop, approved as Annex 2 to Government Decision No 691/2015.

33. As regards the steps taken to set up a complaints mechanism to receive complaints from or on behalf of children, we have to say that relevant procedures are laid down in Order of the NAPCRA Secretary of State No 27/2004 approving the compulsory minimum standards for residential child care facilities addressed to children with disabilities or, as the case may be, in Order of the NAPCRA Secretary of State No 21/2004 approving the compulsory minimum standards for residential child care.

34. Standards 17-20 and 16-19, respectively, set out in the aforementioned orders regulate complaints and protection from abuse.

35. Below are some of the provisions regarding complaints and protection from abuse:

- The service provider and the residential child care facility addressed to children with disabilities must set up a system for the reception, registration and resolution of referrals and complaints about the services provided or facilitated.
- Referrals and complaints are to be handled in a prompt and professional manner and the person concerned must be regularly informed about the progress made and given an answer, in writing, within 30 calendar days.
- The residential care facility has to provide children, their legal representatives, families, and the staff with a short version of the complaints procedures. Children are explained the complaints procedures when they enter the residential care facility, based on their age, type and/or level of disability.
- The manager of the residential care facility must appoint a person to keep clear records of referrals and complaints (petitions, solutions, information provided to petitioners, etc.) and must re-examine referral and complaint records on a regular basis — at least every three months — writing his or her conclusions in the referrals and complaints log.

36. The Ministry of National Education continues to consolidate data on school violence incidents reported in the 1st semester, the 2nd semester and throughout the school year as such data inform the national strategic and policy framework on violence and safety in the school environment.

5. Answer to question 5

37. So far, placement centres have been closed down without any prioritisation criteria or instruments allowing for a well-planned closedown so as to avoid potential risks. Since the start of the child care reform, over 300 placement centres have been closed down (as of 30 September 2016, 161 traditional and modular placement centres were still running, providing care to approximately 6,600 children).

38. In March 2016, NAPCRA started to implement the 30-month long project "Developing the Deinstitutionalisation Plan for Children in Residential Care and Ensuring Their Transition to Community-Based Care". The project is financed under the Administrative Capacity Operational Programme, being implemented with consultancy and expertise from the World Bank.

39. The project goal is to develop common procedures and methodologies for central and local public administration authorities, enabling them to work more efficiently towards the transition from institutional child care to community-based care.

40. This is the first time that the closedown of placement centres will be planned and based on an operational plan. The methodology used to develop a deinstitutionalisation plan for each centre to be closed down will allow the managers of these institutions to strategically plan and base actions on relevant systematic information and each placement centre will be closed down without subsequent risks.

41. It is also the first time that NAPCRA will have a monitoring and evaluation plan available for the transition from institutional care to community-based care, which will be included in a bill and used by NAPCRA as a tool to ensure the methodological coordination of the work carried out by the general directorates for social assistance and child protection, as well as to monitor the implementation of measures stipulated in the National Strategy on the Protection and Promotion of Children's Rights. In addition, the monitoring and evaluation plan will allow for a follow-up on the development of prevention services at local level and an analysis of their effectiveness.

6. Answer to question 6

42. The National Authority for People with Disabilities (NAPD) does not carry out child-related activities. As a central authority with duties in the field of the protection of people with disabilities, the NAPD provides coordination and methodological guidance to the institutions whose work targets adults with disabilities. The NAPD is constantly working with the National Authority for Children's Rights Protection and Adoption to ensure consistency between policies for adults with disabilities and those aimed at children.

43. Regarding the support provided by the Romanian state to families with children with disabilities and the services available for children with mental disabilities, we should mention that, in 2016, Government Decision No 889 approved the Strategy on Children's and Adolescents' Mental Health.

44. In 2016, public mental health services were provided in the following facilities: 22 psychiatric wards and child psychiatry departments from hospitals, 29 mental health centres for children, 7 walk-in centres, and 21 outpatient medical practices.

45. The National Strategy on Children's and Adolescents' Mental Health provides an answer to the issues facing health, education, justice and child protection professionals as well as to those affecting parents, children and adolescents exposed to various risks associated with mental health disorders.

46. The Strategy creates the framework for setting up an integrated system of mental health services for promotion, prevention, identification and intervention at the level of educational, health and social institutions.

47. The steps taken to address mental health disorders affecting children and adolescents are included in the activities of the "National Programme for Mental Health and Prophylaxis of Psychiatric Pathologies" (NPMH) of the Ministry of Health, under the

technical and methodological coordination of the National Centre for Mental Health and Fight against Drugs.

48. Based on the curricula developed in previous years under the NPMH, mental health professionals carried out the following training activities:

- Training of parents in a programme aimed at developing children's social and emotional skills: 2015 — 1,831 parents, 2016 — 1,006 parents;
- Training of school counsellors in a school counsellor training programme across the education system for the early detection and intervention in the case of children and adolescents with developmental disorders: 2015 — 301 school counsellor, 2016 — 595 school counsellors;
- Training of children and adolescents in a pilot programme for the prevention of eating disorders and other associated conditions: 2015 — handbook development, 2016 — 1,073 children and adolescents;
- Training of professionals from mental health centres for children/mixed centres/child psychiatry facilities regarding child assessment based on international instruments related to autistic spectrum disorders: 2016 — 107 professionals.

49. In order to ensure access to medical services and inclusive education, in 2016 the Ministry of Labour and Social Justice, the Ministry of Health and the Ministry of National Education and Scientific Research developed and approved, under a joint order, the evaluation and integrated intervention methodology for establishing the level of disability of children with disabilities, for the educational and vocational guidance of children with special educational needs, and for the habilitation and rehabilitation of children with disabilities and/or special educational needs.

50. The joint order sets forth practical measures for promoting inclusive education, as well as support measures to help the child prepare for and adjust to various periods of transition, including transition to adulthood.

51. The two concepts — disabilities and special educational needs — are clearly defined, with their similarities and differences. As their holistic approach is based on similar institutional resources, a single methodology was needed to ensure a consistent and integrated approach from the perspective of the three systems interacting with children with disabilities and/or special educational needs and their parents, a methodology which is based on case management.

52. The joint order sets out clear unequivocal responsibilities for all the experts involved, regardless of the system they come from and the type of environment — public or private — in which they interact with the child: general practitioners, medical specialists, psychologists, social workers, teachers, case managers, the staff of comprehensive evaluation services and of educational and vocational evaluation and guidance services, members of child protection commissions and of educational and vocational guidance commissions.

7. Answer to question 7

53. One of the steps taken was to develop and approve the National Health Strategy 2014-2020 and the Action Plan for the Implementation of the National Strategy 2014-2020 under Government Decision No 1028/2014.

54. The Strategy contains a separate chapter on strategic lines for improving maternal and child health, namely:

- Improve children's nutritional status;
- Build capacities for prenatal and postnatal genetic diagnosis;
- Enhance access to quality prenatal prophylactic services for all pregnant women and to regionalised care for high-risk cases;

- Increase access to family planning services and improve reproductive behaviour knowledge;
- Build maternal and child health monitoring capacities.

55. In order to operationalise these strategic lines, the following interventions were conducted or are being implemented:

- In the second half of 2016, national consultations were held with public health experts, paediatricians, neonatologists and OB/GYNs to analyse maternal and child health and access to quality services; the final report on the proposed intervention plan is under development;
- Based on the above-mentioned national analysis, a decided measure is to give pregnant women priority access to any kind of medical services, without waiting lists for lab and paraclinical tests;
- According to the current framework agreement on healthcare provision, the social health insurance system covers no-income pregnant women in terms of both preventive procedures and curative procedures, if needed; pregnant women are insured throughout the entire pregnancy and postpartum period;
- Neonatal mortality — occurring within the first month of life — is highly influenced by pathologies associated with premature or underweight newborns, with such deaths accounting for over 50% of infant deaths;
- The staff from neonatology wards benefited from training programmes co-financed by the European Union and the Government of Romania via the Ministry of Health;
- Genetic malformations and vices are the third leading cause of death in children; to increase prenatal diagnosis and genetic counselling capacities, the Ministry of Health set up six regional medical genetics centres across the country, whose work is governmentally financed under national programmes; these regional genetics centres are fully operational;
- A Centre of Excellence for Prenatal Pathologies was set up in 2016 at the National Maternal and Child Health Institute from Bucharest.

56. Since 2013, the National Public Health Institute of Bucharest (NPHI) has been involved in the "European Childhood Obesity Surveillance Initiative (COSI)", a project aimed at collecting and analysing data essential to planning, implementing and evaluating public health actions.

57. The National Woman and Child Health Programme includes an intervention meant to promote breastfeeding and a healthy die as well as to prevent child obesity, with activities such as maternity staff training on the prenatal education of couples, newborn care, and the exclusive breastfeeding of infants; in parallel, information materials were developed on breastfeeding and infant and toddler nutrition.

58. The same programme includes an intervention on preventing maternal morbidity and mortality through increased access, quality and efficiency of medical services addressed to pregnant and postpartum women. During the prenatal consult, focus is placed on detecting obesity in pregnant women, counselling and providing information about a healthy diet and exercising during pregnancy.

59. At the same time, to ensure increased access to healthcare for disadvantaged people, many of whom are Roma, community-based medical services have been developed, namely community health nurses and health mediators working within mayoralties, especially in rural areas and Roma communities.

60. This type of staff increased by nearly 20% in 2016.

61. As to insufficient healthcare access in rural areas for Roma children, the NPHI is running a 2014-2017 project, "Strengthening the National Network of Roma Health Mediators to Improve the Health of the Roma Population", financed with a Norway Grant.

62. Project interventions have been carried out in 45 settlements from six counties with Roma communities. The project hires Roma health mediators and community health nurses.

63. These community teams have worked to improve healthcare access of vulnerable groups, encouraging, for example, higher immunisation rates and health promotion activities.

64. The measures laid down in the National Health Strategy 2014-2020 include creating institutional and legal frameworks that enable the development of community health nursing, setting up model community centres, expanding the service network, building the institutional and technical capacities of community service providers or increasing the number of Roma health mediators from 391 in 2014 to 600 in 2020 and of community health nurses from 982 in 2014 to 3,000 in 2020.

65. In Romania, HIV-positive pregnant women are monitored in nine Regional HIV Infection Surveillance Centres where, after HIV infection has been confirmed, any person, regardless of age, gender, nationality, sexual orientation, is recorded, clinically and biologically monitored and provided specific antiretroviral therapy immediately after diagnosis.

66. Access to antiretroviral therapy has been universal since 2001, when the entire cohort of HIV-positive patients was provided specific therapy. Moreover, Romania is one of the first countries which initiated antiretroviral therapy irrespective of immunological status.

67. The management of HIV-positive child and adolescent patients complies with the 2013-2014 Guidelines for ARV Therapy, containing a separate chapter for this age group.

68. Between May 2014 and August 2016, "Prof. Dr. Matei Balș" National Institute of Infectious Diseases from Bucharest, as Project Promoter, under the coordination of the Ministry of Health as Programme Operator, implemented the project "Improving HIV/AIDS and Hepatitis B and C Prevention and Control in Romania", as part of the 2009-2014 Norwegian Financial Mechanism.

69. A significant part of the budget was earmarked for the syringe exchange programme targeting injection drug users.

70. The services delivered under this project focused on outreach activities carried out in the communities, such as:

- Informing and educating beneficiaries about HIV/AIDS/other sexually transmitted infections, rapid testing procedures, HIV test meaning, general protection and hygiene rules;
- Informing and counselling about risks associated with injection drug use;
- Distributing condoms;
- Exchanging syringes and distributing other sterile injection equipment;
- Recovering and incinerating used syringes;
- Referring beneficiaries to HIV voluntary counselling and testing centres;
- Referring beneficiaries to healthcare facilities specialised in rehab, substitution therapy, or post-cure;
- Distributing information materials.

8. Answer to question 8

71. We should mention that, in the past few years, Romania has managed to overcome the economic and financial crisis and that none of the austerity measures taken was targeted at children.

72. As an EU Member State, Romania is persistently working to catch up with the income levels and living standards of the other EU Member States, though the recent economic crisis slowed down this process.

73. To ensure that actual investments are more consistent with policy commitments taken under the Europe 2020 strategy, the European Commission adopted the Common Strategic Framework for Cohesion Policy 2014-2020, which focuses, among other measures, on the adoption of a strategy on social inclusion and poverty reduction as one of the key instruments for a better concentration of the financial support provided to Romania through European structural and investment funds.

74. In this context, Romania developed and approved the National Strategy on Social Inclusion and Poverty Reduction 2015-2020 and the Strategic Action Plan for 2015-2020 under Government Decision No 383/2015.

75. Starting from the general social inclusion framework of the European Union, the main Strategy results to be delivered are as follows:

- Increase employment of the poor and vulnerable through wide-scale active labour market programmes;
- Increase financial support for low-income people (MII) and introduce pro-work incentives for the beneficiaries of social benefit programme;
- Promote the social inclusion of marginalised communities through an integrated child-centred approach;
- Make social services more functional;
- Integrate social assistance benefits, social services, employment services and other public services by turning the social worker into an "integrator" with extensive case management responsibilities;
- Invest in a strong e-social assistance system;
- Increase the role of social economy for reducing social exclusion;
- Strengthen coordination, monitoring and evaluation mechanisms.

76. We further present some of the general objectives set out under the Social Services area of intervention, which are also aimed at children:

- Ensure mechanisms to increase social responsibility across social services;
- Improve needs assessment and information management systems and connect them to local policies and decision-making practices;
- Improve funding for social services;
- Strengthen and enhance social assistance at community level;
- Set up integrated intervention community teams;
- Develop services for vulnerable groups.

9. Answer to question 9

77. The main measure taken to increase the school enrolment rate has been the development and approval of the Strategy on Early School Leaving Reduction in Romania.

78. The Strategy offers a consistent and coordinated approach while seeking to reach the ambitious targets of the national agenda and of the Europe 2020 strategy, combining prevention, intervention and compensation measures and focusing, most of all, on interventions geared towards schools and students.

79. Prevention measures are meant to reduce the risk of early school leaving before the problem occurs, by giving children a strong base early on to develop their potential and ease their integration into the school environment.

80. Intervention measures are meant to prevent and/or reverse the early school leaving phenomenon by improving the quality of education and vocational training in educational establishments, reacting to early warning signs and providing specific support to students or groups at risk of early school leaving.

81. Compensation measures are meant to help early school leavers resume school, offering school reintegration, vocational training and qualification options.

82. The Strategy on Early School Leaving Reduction puts forward four pillars and six flagship programmes, focusing on prevention, intervention and compensation measures.

83. Pillar 1: Ensure access to education and quality education for all children, Flagship programme 1.1: Increase access to early childhood education and care — this programme seeks to strengthen and successfully scale up early childhood education through completion of preschool education (ages 3-6) and the rapid expansion of ECEC service provision to children under the age of 3 (mostly children aged 2-3 years).

84. Flagship programme 1.2: Ensure quality primary and lower secondary education for all — this programme is based on current achievements in terms of primary and secondary school enrolment. It will focus on two key areas of intervention: improve functional literacy and key competences and strengthen on-the-job teacher training.

85. Pillar 2: Ensure completion of compulsory education by all children, Flagship programme 2.1: Develop early warning systems and strengthen remedial and support programmes for at-risk students in compulsory education. The programme will develop early warning and intervention systems to detect children at risk of dropping out. Also, it will help strengthen and scale up different prevention and remedial programmes, including the School after School programme.

86. Flagship programme 2.2: Improve attractiveness, inclusion, quality and relevance of professional and technical education (PTE) — this programme will re-design PTE paths to make PTE more attractive and relevant, including by developing on-the-job learning opportunities. The programme will also support PTE curricular reform and teacher training.

87. Pillar 3: Reintegrate early school leavers into the education system, Flagship programme 3.1: Ensure an adequate offer of "A Second Chance" learning programmes — this programme intends to support early school leavers in the short run through access to and participation in the "A Second Chance" programme given that prevention and intervention programmes are implemented for a medium or long term. The programme also tries to improve the quality of the "A Second Chance" programme.

88. Pillar 4: Develop adequate institutional support, Flagship programme 4.1: Build governmental capacity to implement, monitor and evaluate the ESL Reduction Strategy — this programme will help create an enabling environment for strategy implementation, monitoring and evaluation, focusing on government's capacity and ability to take a comprehensive approach to early school leaving challenges.

89. As for the steps taken to facilitate the inclusion of migrant, refugee and asylum-seeking children in mainstream schools, one of the measures taken to increase the school enrolment rate and decrease dropout has been to change the teaching method for the Romanian language preparatory course.

90. Thus, legal amendments introduced intensive Romanian language classes versus the previous requirement of two hours for two days a week. The provision on the intensive course of Romanian language was also introduced in the draft amendment of GO No 44/2004 on the social integration of foreigners who benefit from a form of protection or the right of residence in Romania and of nationals of European Union and European Economic Area Member States.

91. Also, a clear provision was introduced in relation to asylum-seeking children's access to ante-preschool, preschool and compulsory school education under the same conditions as Romanian children. This provision was also inserted in the draft amendment of GO No OG 44/2004 on the social integration of foreigners who benefit from a form of protection or the right of residence in Romania and of nationals of European Union and European Economic Area Member States.

10. Answer to question 10

92. During the reference period, food and pocket allowances were raised, clothing allowances were provided as well as increased benefits for children in accordance with age-based calorific needs.

93. Regional Procedural and Accommodation Centres for Asylum Seekers have accommodation facilities, cooking areas, medical offices, clubs, gyms, playgrounds and playrooms for children, sports fields. These facilities are appropriately equipped and refurbished according to the needs.

11. Answer to question 11

94. In 2014, with the entry into force of the new Criminal Code, Law No 286/2009, and the new Criminal Procedure Code, Law No 135/2010, all human trafficking and exploitation offences were criminalised under one chapter.

95. The National Agency against Trafficking in Persons (NATIP) and its public and private institutional partners focused on prevention work and on improving the protection of the rights of child human trafficking victims in the objectives of some transnational projects, implemented in cooperation with the institutions of other European states.

96. To decrease demand and to inform citizens about the criminalisation of the use of services delivered by an exploited person known to the beneficiary as a human trafficking victim, between October 2014 and April 2015 NATIP implemented the human trafficking prevention and communication campaign "Exploitation Kills Souls". The campaign was aimed to help reduce demand for services provided by victims of exploitation and trafficking by informing the consumers of such services and the general public about the condition of the victim, recruitment methods, and legal repercussions. The target group included people attending places where the three types of exploitation may arise (sexual exploitation, forced labour, begging): bars, restaurants, hotels, areas nearby religious buildings (begging), regional labour recruitment agencies (labour exploitation).

97. As part of the project "Best Practice Models for Human Trafficking Victim Care Services", financed under the 2009-2014 Norwegian Financial Mechanism, NATIP started a campaign to prevent human trafficking for exploitation in begging "Ask for help, don't beg!", aimed at raising awareness of child trafficking in vulnerable communities (including Roma communities), identifying the root causes of vulnerability to trafficking and finding possible solutions to prevent human trafficking, in particular children's exploitation in begging.

98. The message of the Campaign "A hand held out does not get help, but money for traffickers!" targeted at-risk children aged 8 to 18, adult representatives of vulnerable communities (parents, informal leaders, etc.), representatives of institutions involved in human trafficking prevention and fight (local authorities, police departments, school inspectorates, general directorates for social assistance and child protection, etc.), and the general public. It involved direct meetings with target group representatives (students and teachers as well as representatives of local communities and authorities) in ten different locations to identify the root causes of vulnerability to trafficking and, in particular, exploitation in begging and to find specific solutions.

99. In 2016, the National Agency against Trafficking in Persons implemented the national prevention campaign Don't Look Away from the Invisible Face! Its Story Can Become Your Story!, which consisted of public information activities regarding sexual exploitation, its causes and effects.

100. On 16 June 2016, in partnership with the Child Helpline Association (CHA), NATIP launched the online information and awareness-raising campaign on child labour trafficking victims — Happy Hands, NOT Hard Worked Hands!.

101. The Campaign was launched on the World Day against Child Labour, with the declared goal to improve knowledge among children, parents, educators and legal

representatives/guardians about the risks and dangers facing children who fall victims to labour trafficking.

12. Answer to question 12

102. On 23 May 2016, Government Emergency Order No 18/2016 amending and supplementing Law No 286/2009 on the Criminal Code, Law No 135/2010 on the Criminal Procedure Code, and supplementing Article 31(1) of Law No 304/2004 on judicial organisation which, among others, translates a number of provisions from European directives concerning the protection of the rights of the child, in particular of child victims, in criminal matters was published in the Official Gazette of Romania No 389.

103. Thus, a number of provisions regarding the obligations set forth in Directive 2011/93 of the European Parliament and of the Council on combating the sexual abuse and sexual exploitation of children and child pornography, and replacing Framework Decision 2004/68/JHA have been translated into national law:

- Definition of pornographic material depicting children and pornographic performance;
- Criminal penalties for solicitation of child prostitution;
- Penalties for attempted offences that were not punishable under national law;
- Harsher penalties if the rape victim is underage;
- Aggravating circumstances for certain types of offences;
- Changes made to the offence of child pornography, namely the elimination of the purpose for which pornographic material depicting children is possessed, stored, made available, etc.;
- Changes made to the limitation period where the child is the victim of certain types of offences in the sense that it starts to run from the date on which the child comes of age or, in the case of his or her death, from the date of death;
- Reducing the number of child hearings as much as possible and ordering a child hearing only when it is absolutely critical for the trial.

104. As regards Directive 2012/29/EU establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, below is a non-exhaustive list of measures which improve child victim protection:

- If the victim is underage, his or her hearing must be recorded. If this is not possible, it will be recorded in the victim's statement;
- The child victim's presumption of vulnerability and the right to be informed about any measures offering protection in that regard;
- The presumption of minority is made where judicial bodies cannot determine the victim's age and there are reasons to believe s/he is underage;
- The victim is heard in properly equipped/adapted rooms, in the presence of the same expert throughout the proceedings (unless this affects the smooth running of the proceedings). When investigating certain types of offences, the hearing is to be conducted by a person of the same sex as the victim. The victim may also be accompanied by a person of his or her choice;
- The victim must be heard as soon as possible and his or her statement holds probative force even if it was made before the start of prosecution.

105. As for the confidentiality guaranteed to victims during criminal proceedings, we should mention the following: under the Criminal Code, the prosecution stage and proceedings are not open to public.

106. At the same time, under the Criminal Procedure Code "if a public trial may prejudice State interests, a person's morals, dignity or private life, the interests of children or justice, the court, at the request of the prosecutor, the parties or ex-officio, may move the hearing in camera for its entirety or for a certain part of the trial". Also, the same legal act provides that "throughout the trial, the court may prohibit the publication and dissemination, by written or audiovisual means, of texts, drawings, photos or pictures revealing the identity of the victim, plaintiff, civilly liable party or witnesses, in accordance with paragraph (3) or (4)".

Part II

13. The Committee invites the State party to provide a brief update (no more than three pages) on the information presented in its report with regard to:

(a) New bills or laws, and their respective regulations;

- Law No 207/2016 regulating the marketing of breast-milk substitutes;
- Law No 57/2016 amending and supplementing Law No 273/2004 on adoption proceedings and other legal acts;
- Emergency Order No 18/2017 on community health nursing;
- Emergency Order No 33/2016 amending and supplementing certain legal acts concerning vital records and identity documents of Romanian citizens;
- Government Decision No 801/2016 laying down procedures for the collection and deletion of data related to people with a declared identity and amending and supplementing certain legal acts concerning the consistent application of civil and population registration provisions;
- Government Decision No 604/2016 approving the regulation for the implementation of Law No 253/2013 on the enforcement of sentences, educational measures and other non-custodial measures imposed by judicial bodies during criminal trial;
- Government Decision No 579/2016 approving the detailed rules for the implementation of Law No 273/2004 on adoption proceedings, amending and supplementing Government Decision No 233/2012 on the services and activities that Romanian private bodies may carry out during domestic adoption proceedings, as well as the methodology for their authorisation and amending Government Decision No 1.441/2004 on the authorisation of foreign private bodies to carry out inter-country adoption activities;
- Government Decision No 157/2016 of 10 March 2016 approving the regulation for the implementation of Law No 254/2013 on the enforcement of sentences and custodial measures imposed by judicial bodies during criminal trial;
- Government Decision No 978/2015 approving minimum cost standards for social services and the monthly income level per family member used to work out the monthly care fee to be paid by the legal supporters of elderly people from residential care centres;
- Government Decision No 691/2015 approving the procedure for monitoring the upbringing and care of children with migrant parents and the services from which they can benefit, as well as approving the working methodology for the cooperation of general directorates for social assistance and child protection and public social assistance services and the templates for the documents they have to develop;

- Joint Order of the Minister of Labour, Family, Social Protection and the Elderly, the Minister of Health and the Minister of National Education and Scientific Research No 1985/1105/5805/2016 approving the evaluation and integrated intervention methodology for establishing the level of disability of children with disabilities, for the educational and vocational guidance of children with special educational needs, and for the habilitation and rehabilitation of children with disabilities and/or special educational needs;

- Joint Order of the Minister of Health and the Minister of Labour, Family, Social Protection and the Elderly No 1306/1083/2016 approving bio-psycho-social criteria for establishing disabled children's level of disability and the means for applying such criteria, as subsequently amended;

- Joint Order of the Minister of Health, the Minister of National Education and Scientific Research, the president of the National Health Insurance House and the Minister of Labour, Family, Social Protection and the Elderly No 908/5194/714/1945/2016 approving the detailed rules for the implementation of Law No 151/2010 on integrated specialized health, educational and social services for people with autistic spectrum disorders and associated mental health disorders.

(b) New institutions (and their mandates) or institutional reforms;

- In 2014, the Ombudsman department for the Prevention of Torture and other Cruel, Inhuman or Degrading Punishment or Treatment in Places of Detention was set up to fulfil specific duties related to the National Mechanism for the Prevention of Torture in Places of Detention in accordance with the Optional Protocol, adopted in New York on 18 December 2002, to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment, adopted in New York on 10 December 1984.

- In 2016, the National Commission for Desegregation and Educational Inclusion was set up under the Ministry of National Education and mandated to coordinate the implementation of the Action Plan for school desegregation and higher quality education in pre-university educational establishments.

- The National Commission for Desegregation and Educational Inclusion is made up of experts from the Ministry of National Education, academia, non-governmental organizations, and other relevant institutions.

- The minister of national education is responsible for implementing the recommendations of the National Commission for Desegregation and Educational Inclusion.

- Also in 2016, the Monitoring Council was set up as an autonomous administrative authority with legal personality, under parliamentary scrutiny. To reach its goal, it fulfils duties in line with the principles of legality, respect for human dignity, non-discrimination, equal opportunities, functional and staff independence, impartiality, and objectivity. The Monitoring Council makes recommendations regarding the respect for the rights of institutionalized persons with disabilities while monitoring their implementation by public or private entities with relevant responsibilities.

(c) Recently introduced policies, programmes and action plans and their scope and financing;

- National Strategy on Tuberculosis Control in Romania for 2015-2020, approved under Government Decision No 121/2015;

- National Strategy on the Social Reintegration of Persons Deprived of Liberty, approved under Government Decision No 389/2015;

- National Strategy on the Protection and Promotion of Children's Rights 2014-2020 and the Operational Plan for the Implementation of the National

Strategy on the Protection and Promotion of Children's Rights 2014-2020, approved under Government Decision No 1113/2014. The measures set out in the two documents apply to the fields of child protection and adoption and are to be implemented based on state budget and grant funding;

- National Strategy on Social Inclusion and Poverty Reduction 2015-2020 and the Strategic Action Plan for 2015-2020, approved under Government Decision No 383/2015. The measures set out in the two documents apply to the fields of social assistance and social inclusion;
- National Strategy "A Barrier-Free Society for Persons with Disabilities" 2016-2020 and the Operational Plan for the Implementation of the National Strategy "A Barrier-Free Society for Persons with Disabilities" 2016-2020, approved under Government Decision No 655/2016;
- National Strategy on Children's and Adolescents' Mental Health 2016-2020, approved under Government Decision No 889/2016.

(d) Recent ratifications of human rights instruments.

- Council of Europe Convention on preventing and combating violence against women and domestic violence, adopted in Istanbul on 11 May 2011, ratified by Law No 30/2016.

Part III

14. Please provide consolidated information for the past three years on the budget lines regarding children and social sectors by indicating the percentage of each budget line in terms of the total national budget and the gross national product

Year of reference	*2013*		*2014*		*2015*	
Expenditure for:	*Thousand of lei*	*% of the GNP*	*Thousand of lei*	*% of the GNP*	*Thousand of lei*	*% of the GNP*
Insurances and social assistance	72 399.4	11.4%	74 957.6	11.2%	80 344.3	11.3%
Education	18 920.8	3.0%	20 643.4	3.1%	23 031.5	3.2%
Health	27 427.2	4.3%	26 660.9	4.0%	28 917.8	4.1%

Source: Ministry of Public Finance.

15. Please provide, if available, updated statistical data, disaggregated by age, sex, ethnic origin, national origin, geographic location and socioeconomic status, for the past three years, on the number of:

(a) Child victims of ill-treatment, violence and abuse, including sexual abuse, as well as the number of complaints, investigations, prosecutions and convictions in that regard:

- Statement regarding child victims involved in cases tried on the merits before local courts, county courts, and courts of appeal

Reference year	*Type of court*	*Total number of child victims in cases tried on the merits, of which:*	*No of child victims in cases falling into the category of: "ill-treatment, violence, abuse (including sexual abuse)"*
2014	Local court	1 639	1 210
	County court	782	672
	Court of appeal	3	0

Reference year	*Type of court*	*Total number of child victims in cases tried on the merits, of which*	*No of child victims in cases falling into the category of "ill-treatment, violence, abuse (including sexual abuse)"*
2015	Local court	1 953	1 609
	County court	591	488
	Court of appeal	13	1
2016	Local court	2 024	1 554
	County court	487	397
	Court of appeal	28	1

Source: Ministry of Justice

- Number of crimes against children, by prosecution stage (complaint, initiation of prosecution of the suspect, declination, and resolution), and number of child victims of domestic violence-related offences

	Complaint			*I.P.**			*Declination*			*Resolution*		
	01.02.-31.12.2014	*2015*	*2016*	*01.02.-31.12.2014*	*2015*	*2016*	*01.02.-31.12.2014*	*2015*	*2016*	*01.02.-31.12.2014*	*2015*	*2016*
Crimes against children	4 442	4 967	5 642	846	1 174	1233	414	389	401	1 233	1 521	1 976
Murder (Articles 188-189 of CC)	7	13	10				10	14	11			
Attempted murder (Articles 188-189 of CC)	12	12	11				14	15	14			
Assault and battery (Article 193 of CC)	1 222	1 381	1 741	115	89	162	6	5	8	494	644	934
Bodily harm (Article 194 of CC)	9	8	11	1	4	6				3	2	1
Assault or bodily harm causing death (Article 195 of CC)			1					1	1			
Ill-treatment of a child (Article 197 of CC)	400	438	481	42	67	74	5	5	5	76	69	94
Unlawful deprivation of liberty (Article 205 of CC)	134	155	185	28	33	27	11	6	11	19	17	17
Child trafficking (Article 211 of CC)	214	209	196				292	276	289	26		
Procuring (Article 213 of CC)	27	34	26	4	10	15	22	13	15	4	10	13
Exploitation of begging (Article 214 of CC)	26	27	29	1	3	5	1	2	2	1		3
Rape (Article 218 of CC) of a person under the age of 16	554	625	692	130	166	219	24	11	7	119	176	188
Sexual assault (Article 219 of CC) on a person under the age of 16	75	105	125	21	41	47	8		2	10	25	32

	Complaints			I.P.*			Declinations			Resolutions		
	01.02 - 31.12.2014	2015	2016	01.02 - 31.12.2014	2015	2016	01.02 - 31.12.2014	2015	2016	01.02 - 31.12.2014	2015	2016
Sexual intercourse with a minor (Article 220 of CC)	1 556	1751	1885	450	664	600	18	29	25	434	498	617
Corruption of minors (Article 221 of CC)	180	187	210	50	90	66	3	9	6	45	78	69
Recruitment of minors for sexual purposes (Article 222 of CC)	26	22	39	4	7	12		3	5	2	2	8

	Total			Male			Female		
Child victims of domestic violence	**1 147**	**1 649**	**1 632**	**611**	**845**	**752**	**536**	**804**	**880**
Murder (Articles 188-189 of CC)	9	12	8	4	7	6	5	10	2
Attempted murder (Articles 188-189 of CC)	7	16	10	6	3	7	1	4	3
Assault and battery (Article 193 of CC)	647	1204	841	363	513	398	284	418	443
Bodily harm (Article 194 of CC)	3	3	1	2			1	2	1
Assault or bodily harm causing death (Article 195 of CC)								1	
Ill-treatment of a child (Article 197 of CC)	312	678	472	206	273	282	106	152	190
Unlawful deprivation of liberty (Article 205 of CC)	10	43	37	6	14	14	4	21	23
Procuring (Article 213 of CC)	3	3	3				3	3	3
Exploitation of begging (Article 214 of CC)		25	25		16	16		14	9
Rape (Article 218 of CC)	65	113	104	9	7	11	56	80	93
Sexual assault (Article 219 of CC)	12	36	36		4	6	12	24	30
Sexual intercourse with a minor (Article 220 of CC)	57	79	71	8	4	9	49	60	62
Corruption of minors (Article 221 of CC)	22	31	24	7	4	3	15	15	21

* I.P. — Initiation of prosecution of the suspect.

Source: Ministry of Interior — Directorate for Criminal Records, Statistics and Operational Records (DCRSOR).

(b) Child victims of trafficking

- Child victims of trafficking offences under Article 13 of Law No 678/2001

	2014	2015	2016[1]
Total victims identified:	**757**	**880**	**757**
Child victims identified, of whom[2]	290	316	355
Male	10	40	42
Female	280	276	313

[1] As regards the victims identified in 2016, the data are not final as of 6 February 2016, therefore they should be interpreted with caution. Until they are fully processed and cleansed, variations may occur in the frequency of descriptive indicators.

[2] All the child victims of human trafficking identified in 2016 and recorded into SIMEV (Integrated Human Trafficking Victim Monitoring and Evaluation System) were Romanian citizens.

	2014	2015	2016[1]
Age	Under 7 — 0 7-9 — 2 10-13 — 37 14-17 — 251	Under 7 — 3 7-9 — 3 10-13 — 30 14-17 — 280	Under 7 — 6 7-9 — 5 10-13 — 56 14-17 — 284[3]
Top 5 counties of residence (source counties) for child victims of human trafficking	Dolj Iaşi Prahova Bihor Braşov	Iaşi Dâmboviţa Argeş Braşov Dolj	Cluj Bacău Dolj Galaţi Prahova
Forms of exploitation	Sexual exploitation, including pornography —272 Forced begging — 7 Child labour — 6 Coerced into committing theft — 1 Attempts — 4	Sexual exploitation, including pornography —248 Forced begging — 32 Child labour — 8 Coerced into committing theft — 4 Other — 1	Sexual exploitation, including pornography — 287 Forced begging — 28 Child labour — 8 Coerced into committing theft — 1 Other — 3 Attempts — 28

(c) Cases of neglect and abuse, especially in institutions and alternative care settings:

Year	*2014*			*2015*			*1st half of 2016*		
Cases of:	*Residential care settings*	*Educational establishments*	*Other institutions*	*Residential care settings*	*Educational establishments*	*Other institutions*	*Residential care settings*	*Educational establishments*	*Other institutions*
(a) Physical abuse	11	18	2	59	28	6	19	26	4
(b) Emotional abuse	8	15	1	1	24	1	12	11	1
(c) Sexual abuse	5	7	1	9	12	3	2	6	0
(d) Neglect	19	32	24	23	14	32	5	12	20
(e) Child labour	3	0	5	6	0	0	0	0	0
(f) Sexual exploitation	0	0	0	3	0	0	0	0	0
(g) Exploitation for criminal purposes	0	1	0	0	0	0	0	0	0
Total	**46**	**73**	**33**	**101**	**78**	**42**	**38**	**55**	**25**

Source: National Authority for the Protection of Children's Rights and Adoption.

(d) Children in detention facilities and penitentiary institutions, including children detained for petty crimes

- Statistics regarding children in the facilities under the National Prison Administration, as of 31 December 2016:

Children as of 31 December 2016	*Boys*	*Girls*
Under 14	0	0
14-15	6	0
15-16	40	38
16-17	125	114

[3] The age of four child victims is not available.

Children as of 31 December 2016		*Boys*	*Girls*
17-18	236	229	7
Total	**407**	**387**	**20**

Source: Ministry of Justice.

(e) Cases of corporal punishment, especially in schools and alternative care settings

No data available.

(f) Cases of bullying in schools and the percentage of schools that have implemented a system for recording and documenting cases of bullying

No data available.

(g) Children living in extreme poverty

	2013	*2014*	*2015*
Rate of relative poverty for the age group 0-17 (percentage)	34.7	39.3	38.1

Source: National Institute of Statistics.

(h) Roma children in the education system

	2015		*2016*	
Age group	*Male*	*Female*	*Male*	*Female*
70-74	0	1	0	0
65-69	0	1	0	1
60-64	4	4	2	
55-59	1	8	3	5
50-54	1	4	1	2
45-49	16	14	18	13
40-44	45	36	51	32
35-39	66	65	62	55
30-34	89	57	61	29
25-29	113	54	94	45
20-24	1 592	1 042	853	542
15-19	9 217	7 963	7 865	6 642
10-14	12 082	11 742	11 936	11 577
5-9	5 805	5 739	7 792	7 550
0-4	0	3	86	100
Total	**29 031**	**26 733**	**28 824**	**26 593**

Source: Ministry of National Education.

(i) Refugee children and asylum-seeking children

	2014			*2015*			*2016*		
Age group	*F*	*M*	*Total*	*F*	*M*	*Total*	*F*	*M*	*Total*
0-13	80	120	200	80	95	175	190	200	390
14-17	10	45	55	20	35	55	30	95	125

	2014			2015			2016		
Age group	*F*	*M*	*Total*	*F*	*M*	*Total*	*F*	*M*	*Total*
Total	**90**	**165**	**255**	**100**	**130**	**230**	**220**	**290**	**515**

Source: General Inspectorate for Immigration.

(j) Unaccompanied children (including appointment of a guardian)

Situation of causes judged by the Law Courts having as object "Guardianship"
(field: Minors and Family)

Year of reference	*Initial stock — number of causes*	*Number of entered causes*	*Total number of causes*	*Number of solved causes*	*Causes on stock at the end of the reporting period — number*
2014	804	995	1 799	1 218	581
Out of which nomination of a guardian/ provisory guardianship	436	581	1017	724	293
2015	581	1 185	1 766	1 254	512
Out of which nomination of a guardian/ provisory guardianship	293	658	951	680	271
2016	512	1 258	1 770	1 328	442
Out of which nomination of a guardian/ provisory guardianship	271	687	958	790	168

Situation of causes judged by the Law Courts having as object "Guardianship — authorisations released to the Guardian"
(field: Minors and family)

Year of reference	*Initial stock — number of causes*	*Number of entered causes*	*Total number of causes*	*Number of solved causes*	*Causes on stock at the end of the reporting period — number*
2014	79	213	292	213	79
2015	79	234	313	209	104
2016	104	278	382	259	123

Source: Ministry of Justice.

16. Please provide, if available, updated statistical data disaggregated by age, sex, ethnic origin, national origin, geographic location and socioeconomic status, for the past three years, on:

(a) Children working in the informal sector and children in street situations:

(a) Number of street children:

	2014	*2015*	*1st half of 2016*
Total number of street children, of whom:	**695**	**674**	**558**
Children living on the streets with their family	194	229	138
Children living on the streets without their family	165	172	171
Children working on the streets and going back to their families at the end of the day	336	273	249

Source: National Authority for the Protection of Children's Rights and Adoption.

Distribution of street children by sex and age group	*2014*	*2015*	*1st half of 2016*
Male	422	382	328
Female	273	292	230
<1 year of age	18	11	7
1-2 years of age	32	25	12
3-6 years of age	74	106	77
7-9 years of age	145	132	138
10-13 years of age	215	204	157
14-17 years of age	211	196	167

Source: National Authority for the Protection of Children's Rights and Adoption.

(b) Children separated from their parents

Year	*2014*	*2015*	*1st half of 2016*
No. of children separated from their parents	58 178	57 279	57 452

Source: National Authority for the Protection of Children's Rights and Adoption.

(c) Children placed in institutions and with foster families

	31 December 2014	*31 December 2015*	*1st half of 2016*
Total	**58 178**	**57 279**	**57 452**
Number of children in (public and private) residential care facilities	21.54	20 291	19 832
Number of children placed with families/ people (relatives within the 4th degree of consanguinity, other families/people)	17.84	18 357	18 708
Number of children in foster care	18 798	18 631	18 912

Source: National Authority for the Protection of Children's Rights and Adoption.

(d) Children adopted domestically or through inter-country adoptions

	Number of adopted boys				*Number of adopted girls*			
	Age group – years				*Age group – years*			
Year of adoption	*0*	*1-4*	*5-9*	*10+*	*0*	*1-4*	*5-9*	*10+*
2014	0	372	117	32	2	379	134	35
				521				550
								1 071
2015	2	387	95	32	1	396	139	32
				516				568
								1 084
1st half of 2016	1	102	24	6	0	141	37	7
				133				185
								318
Total	**3**	**861**	**236**	**70**	**3**	**916**	**310**	**74**
				1 170				**1 303**
								2 473

Source: National Authority for the Protection of Children's Rights and Adoption.

(e) Children who have benefited from the State's welfare system

- Average number of beneficiaries — social assistance benefits

Average number of beneficiaries month	*2013*	*2014*	*2015*
Child benefits	3 779 894	3 727 859	3 691 195
Child-rearing allowance	142 170	139 572	138 350
Child-rearing incentive	30 780	33 659	37 384
Family support allowance	260 416	247 620	277 624
Monthly placement allowance	40 352	39 165	40 033
Food allowance for children with HIV/AIDS	165	176	178

Source: Ministry of Labour and Social Justice.

(f) Infant mortality and under five mortality

- Number of infant deaths and infant mortality rate

	Absolute data			*Rates (per 1,000 live births)*		
Year	***Total***	*Urban*	*Rural*	***Total***	*Urban*	*Rural*
2013	**1 680**	741	939	**7.8**	6.3	9.7
2014	**1 634**	654	980	**8.4**	6.2	10.9
2015	**1 503**	646	857	**7.5**	5.8	9.5

Source: National Institute of Statistics.

(b) Mortality rates, by sex and area of residence, for 2013-2015 are shown in the table below:

- Mortality rates for ages 1-4 per 100,000 inhabitants, by area of residence, in 2013-2015

	2013	*2014*	*2015*
Urban	24.61	25.18	24.61
Rural	47.08	44.82	46.44
Male	41.83	35.63	35.49
Female	27.52	32.65	33.78

Source: National Public Health Institute — National Centre for Public Health Statistics and Information Systems.

(g) Teenage pregnancy and girls receiving medical and professional services for pregnancy and childbirth

- Pregnant teenagers, by age group

	Age group	
Year	*Under 15*	*15-19*
2013	734	12 456
2014	654	12 675
2015	511	10 649

Source: National Public Health Institute — National Centre for Public Health Statistics and Information Systems.

(h) Abortions

- Abortions, by age group, in 2015

	Age group	
Year	*Under 15*	*15-19*
2015	422	6 431

Source: National Public Health Institute — National Centre for Public Health Statistics and Information Systems.

(i) Sexually transmitted infections, including HIV/AIDS

- Number of patients living with HIV/AIDS

	Ages 0-14		*Ages 15-19*	
Year	*M*	*F*	*M*	*F*
2014	96	112	105	82
2015	102	109	94	83
30 September 2016	96	104	89	100

Source: Department for HIV/AIDS Monitoring and Evaluation in Romania — "Prof. Dr. M. Balş" National Institute of Infectious Diseases.

(j) Number of birth registrations and birth certificates issued

Year	*Birth registrations*	*Birth certificates issued*
2014	252 102	533 270
2015	264 816	553 066
2016	254 072	567 672

Source: Ministry of Interior.

17. Please provide, if available, updated statistical data, disaggregated by age, sex, socioeconomic background, national origin, for the past three years, on the number and/or rates of migrant children in detention settings, including juvenile detention centres, and in police custody.

Year	*No of children*		*Citizenship*	*Type of crime*
2014	0	0	0	0
2015	0	0	0	0
2016	2	Moldova	Syria	Robbery/Attempted aggravated robbery
Total	**2**			

Source: Ministry of Justice.

18. Please provide information on how long children, particularly children from ethic groups, are remaining locked up by the police, with reference both to children in need of care and protection and to children in conflict with the law.

No data available.

19. Please provide data, disaggregated by age, sex, type of disability, ethnic origin and geographic location, for the past three years, on the number of children with disabilities:

(a) Living with their families;

(b) Living in institutions;

(c) Attending regular primary schools;

(d) Attending regular secondary schools;

(e) Attending special schools;

(f) Out of school;

(g) Abandoned by their families.

Children holding disability certificates, based on where they live	*2014*	*2015*	*1st half of 2016*
• With their biological family	60 462	61 852	62 486
• In the special protection system, of whom:	10 031	9 811	9 979
• With extended family	1 058	1 040	1 111
• With other families/people	387	436	492
• In foster care	3 476	3 534	3 527
• In residential care	5 110	4 801	4 849
Total	**70 493**	**71 663**	**72 465**

Source: National Authority for the Protection of Children's Rights and Adoption.

(c), (d) Distribution of children with disabilities by form of education attended:

Form of education attended by children with disabilities	*2014*	*2015*	*1st half of 2016*
• Children attending mainstream education	24 036	24 809	26 054
• Children attending special education	12 127	12 263	11 347
• Children attending integrated special education, of whom:	2 553	2 519	2 445
• In a compact class	151	121	111
• In a group	292	249	319
• Individually	2 110	2 149	2 015
• Other forms of education	1 074	2 248	1 597
Total children holding disability certificates who attend a form of education	**39 790**	**41 839**	**41 443**

Source: National Authority for the Protection of Children's Rights and Adoption.

20. Please provide data, disaggregated by, inter alia, age, sex, socioeconomic background, geographical location and ethnic and national origin, for the past three years, on:

(a) The enrolment and completion rates, in percentage, of the relevant age groups in pre-primary school, primary school and secondary school;

• Enrolment rate of school-age population

	Gross enrolment rate	
School year	*Pre-primary school*	*Primary school*
2013/14	83.8%	92.8%
2014/15	84.1%	91.4%
2015/16	84.1%	90.7%

Source: National Institute of Statistics.

(b) Number and percentage of dropouts and repetitions;

Year	Total students		Dropouts		Repeaters		% Dropouts		% Repeaters	
	M	F	M	F	M	F	M	F	M	F
2014	1 583 162	1 517 619	15 663	12 887	56 312	35 486	0.99%	0.85%	3.56%	2.34%
2015	1 560 484	1 497 425	17 091	14 280	59 293	36 545	1.10%	0.95%	3.80%	2.44%

Source: Ministry of National Education

No	Mother tongue (ethnic origin)	2014-2015 Total		2014-2015 Dropouts		2014-2015 Repeaters		2015-2016 Total		2015-2016 Dropouts		2015-2016 Repeaters	
		M	F	M	F	M	F	M	F	M	F	M	F
1	German	4 508	5 413	6	3	25	6	4 189	4 942	10	8	15	6
2	Hungarian	72 126	70 659	953	836	2 321	1 735	71 297	69 463	1 000	880	2 558	1 851
3	Romani (Romany)	3 098	2 819	100	105	485	364	2 919	2 655	117	90	484	405
4	Romanian	1 501 215	1 436 716	14 566	11 896	53 393	33 336	1 479 995	1 418 491	15 929	13 263	56 143	34 213
5	Ukrainian	799	745	6	6	17	4	770	713	10	4	20	9
7	Chinese	32	22	0	0	1	0	31	23	0	0	1	0
8	Italian	67	26	5	1	0	0	64	30	4	1	0	0
11	Serbian	164	160	0	0	0	1	152	150	1	4	0	1
12	Slovak	227	220	0	0	4	2	193	181	0	0	2	0
14	English	17	10	1	0	0	1	14	14	0	0	1	0
16	Russian	159	147	0	0	3	0	158	147	0	1	5	1
17	Spanish	9	16	0	0	0	0	12	14	0	1	0	0
19	Croatian	133	138	1	1	2	0	127	132	0	1	4	2
20	Turkish	563	497	25	39	61	37	519	439	20	4	60	57
	Total	**1 583 117**	**1 517 588**	**15 663**	**12 887**	**56 312**	**35 486**	**1 560 440**	**1 497 394**	**17 091**	**14 280**	**59 293**	**36 545**
	Percentage			0.99%	0.85%	3.56%	2.34%			1.10%	0.95%	3.80%	2.44%

Source: Ministry of National Education

(c) The teacher-pupil ratio.

21. Please provide the Committee with an update of any data in the report that may have been outdated by more recent data collected or other new developments.

22. In addition, the State party may list areas affecting children that it considers to be of priority with regard to the implementation of the Convention.